

Fill in this information to identify your case:

Debtor 1 Larry Williams

Debtor 2 Marilyn Y Williams  
(Spouse, if filing)

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number 17-36758  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

	Debtor 1	Debtor 2 or non-filing spouse
<b>1. Fill in your employment information.</b>		
If you have more than one job, attach a separate page with information about additional employers.	<b>Employment status</b> <input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Include part-time, seasonal, or self-employed work.	<b>Occupation</b> _____	<b>Accounting</b> _____
Occupation may include student or homemaker, if it applies.	<b>Employer's name</b> _____	<b>CBRE</b> _____
	<b>Employer's address</b> _____	<b>200 Park Ave 20th Fl</b> <b>New York, NY 10166</b> _____
	<b>How long employed there?</b> _____	<b>24 years</b> _____

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>5,995.88</u>
<b>3. Estimate and list monthly overtime pay.</b>	3. +\$ <u>0.00</u>	+\$ <u>666.21</u>
<b>4. Calculate gross income.</b> Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>6,662.09</u>

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ <b>0.00</b>	\$ <b>6,662.09</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <b>0.00</b>	\$ <b>1,098.44</b>
5b. Mandatory contributions for retirement plans	5b. \$ <b>0.00</b>	\$ <b>0.00</b>
5c. Voluntary contributions for retirement plans	5c. \$ <b>0.00</b>	\$ <b>389.33</b>
5d. Required repayments of retirement fund loans	5d. \$ <b>0.00</b>	\$ <b>0.00</b>
5e. Insurance	5e. \$ <b>0.00</b>	\$ <b>156.72</b>
5f. Domestic support obligations	5f. \$ <b>0.00</b>	\$ <b>0.00</b>
5g. Union dues	5g. \$ <b>0.00</b>	\$ <b>0.00</b>
5h. Other deductions. Specify:	5h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <b>0.00</b>	\$ <b>1,644.49</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <b>0.00</b>	\$ <b>5,017.60</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>0.00</b>	\$ <b>0.00</b>
8b. Interest and dividends	8b. \$ <b>0.00</b>	\$ <b>0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ <b>0.00</b>
8d. Unemployment compensation	8d. \$ <b>0.00</b>	\$ <b>0.00</b>
8e. Social Security	8e. \$ <b>0.00</b>	\$ <b>0.00</b>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ <b>0.00</b>	\$ <b>0.00</b>
8g. Pension or retirement income	8g. \$ <b>2,659.18</b>	\$ <b>0.00</b>
8h. Other monthly income. Specify:	8h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <b>2,659.18</b>	\$ <b>0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <b>2,659.18</b> + \$ <b>5,017.60</b>	= \$ <b>7,676.78</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	<b>0.00</b>
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$	<b>7,676.78</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: <b>Husband is no longer employed</b>		

Combined monthly income

Fill in this information to identify your case:

Debtor 1 Larry Williams

Debtor 2 Marilyn Y Williams  
(Spouse, if filing)

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number 17-36758  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☐ No

☒ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

- ☐ No  
☐ Yes  
☐ No  
☐ Yes  
☐ No  
☐ Yes  
☐ No  
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No  
☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 2,389.09

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 300.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a. \$	<b>235.00</b>
6b. Water, sewer, garbage collection	6b. \$	<b>135.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<b>385.00</b>
6d. Other. Specify: _____	6d. \$	<b>0.00</b>
<b>7. Food and housekeeping supplies</b>	7. \$	<b>500.00</b>
<b>8. Childcare and children's education costs</b>	8. \$	<b>0.00</b>
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$	<b>125.00</b>
<b>10. Personal care products and services</b>	10. \$	<b>80.00</b>
<b>11. Medical and dental expenses</b>	11. \$	<b>40.00</b>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<b>180.00</b>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$	<b>82.00</b>
<b>14. Charitable contributions and religious donations</b>	14. \$	<b>50.00</b>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<b>123.00</b>
15b. Health insurance	15b. \$	<b>0.00</b>
15c. Vehicle insurance	15c. \$	<b>533.00</b>
15d. Other insurance. Specify: <b>Umbrella policy</b>	15d. \$	<b>40.00</b>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
	16. \$	<b>0.00</b>
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$	<b>409.25</b>
17b. Car payments for Vehicle 2	17b. \$	<b>0.00</b>
17c. Other. Specify: _____	17c. \$	<b>0.00</b>
17d. Other. Specify: _____	17d. \$	<b>0.00</b>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>		
	18. \$	<b>0.00</b>
<b>19. Other payments you make to support others who do not live with you.</b>		
	\$	<b>0.00</b>
Specify: _____		
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$	<b>0.00</b>
20b. Real estate taxes	20b. \$	<b>0.00</b>
20c. Property, homeowner's, or renter's insurance	20c. \$	<b>0.00</b>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<b>0.00</b>
20e. Homeowner's association or condominium dues	20e. \$	<b>0.00</b>
<b>21. Other:</b> Specify: _____	21. +\$	<b>0.00</b>
<b>22. Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$	<b>5,606.34</b>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	<b>2,069.23</b>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	<b>7,675.57</b>
<b>23. Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$	<b>7,676.78</b>
23b. Copy your monthly expenses from line 22c above.	23b. -\$	<b>7,675.57</b>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	<b>1.21</b>
<b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain here: _____		

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

**Fill in this information to identify your case:**

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**  
(Spouse, if filing)  
United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**  
Case number **17-36758**  
(If known)

Check if this is:

- ☐ An amended filing  
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

☐

**Official Form 106J-2**

**Schedule J-2: Your Expenses for Separate Household of Debtor 2**

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. *If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J.* Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. **Do you and Debtor 1 maintain separate households?**

☐ No. Do not complete this form.  
☒ Yes

2. **Do you have dependents?** ☒ No

Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

Do not state the dependents names.

Fill out this information for each dependent.....

**Dependent's relationship to Debtor 2**

**Dependent's age**

**Does dependent live with you?**

☐ No  
☐ Yes  
☐ No  
☐ Yes  
☐ No  
☐ Yes  
☐ No  
☐ Yes

3. **Do your expenses include expenses of people other than yourself and your dependents?** ☒ No  
☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

**Your expenses**

4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

4. \$ **500.00**

**If not included in line 4:**

4a. Real estate taxes

4a. \$ **0.00**

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

- |  |                    |               |
|--|--------------------|---------------|
| 4b. Property, homeowner's, or renter's insurance   | 4b. \$             | <b>0.00</b>   |
| 4c. Home maintenance, repair, and upkeep expenses  | 4c. \$             | <b>0.00</b>   |
| 4d. Homeowner's association or condominium dues  | 4d. \$             | <b>0.00</b>   |
| 5. <b>Additional mortgage payments for your residence</b> , such as home equity loans  | 5. \$              | <b>0.00</b>   |
| <b>6. Utilities:</b>   |                    |               |
| 6a. Electricity, heat, natural gas   | 6a. \$             | <b>0.00</b>   |
| 6b. Water, sewer, garbage collection   | 6b. \$             | <b>0.00</b>   |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c. \$             | <b>0.00</b>   |
| 6d. Other. Specify: _____  | 6d. \$             | <b>0.00</b>   |
| 7. <b>Food and housekeeping supplies</b>   | 7. \$              | <b>300.00</b> |
| 8. <b>Childcare and children's education costs</b>   | 8. \$              | <b>0.00</b>   |
| 9. <b>Clothing, laundry, and dry cleaning</b>  | 9. \$              | <b>100.00</b> |
| 10. <b>Personal care products and services</b>   | 10. \$             | <b>0.00</b>   |
| 11. <b>Medical and dental expenses</b>   | 11. \$             | <b>0.00</b>   |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12. \$             | <b>687.00</b> |
| 13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>  | 13. \$             | <b>25.00</b>  |
| 14. <b>Charitable contributions and religious donations</b>  | 14. \$             | <b>0.00</b>   |
| <b>15. Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |                    |               |
| 15a. Life insurance  | 15a. \$            | <b>0.00</b>   |
| 15b. Health insurance  | 15b. \$            | <b>0.00</b>   |
| 15c. Vehicle insurance   | 15c. \$            | <b>0.00</b>   |
| 15d. Other insurance. Specify: _____   | 15d. \$            | <b>0.00</b>   |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: _____  | 16. \$             | <b>0.00</b>   |
| <b>17. Installment or lease payments:</b>  |                    |               |
| 17a. Car payments for Vehicle 1  | 17a. \$            | <b>457.23</b> |
| 17b. Car payments for Vehicle 2  | 17b. \$            | <b>0.00</b>   |
| 17c. Other. Specify: _____   | 17c. \$            | <b>0.00</b>   |
| 18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>   | 18. \$             | <b>0.00</b>   |
| 19. <b>Other payments you make to support others who do not live with you.</b><br>Specify: _____   | 19. \$             | <b>0.00</b>   |
| <b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>   |                    |               |
| 20a. Mortgages on other property   | 20a. \$            | <b>0.00</b>   |
| 20b. Real estate taxes   | 20b. \$            | <b>0.00</b>   |
| 20c. Property, homeowner's, or renter's insurance  | 20c. \$            | <b>0.00</b>   |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. \$            | <b>0.00</b>   |
| 20e. Homeowner's association or condominium dues   | 20e. \$            | <b>0.00</b>   |
| 21. <b>Other:</b> Specify: _____   | 21. +\$            | <b>0.00</b>   |
| 22. <b>Your monthly expenses.</b> Add lines 5 through 21.<br>The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.  | \$ <b>2,069.23</b> |               |
| 23. Line not used on this form.  |                    |               |
| 24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b><br>For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |                    |               |

☒ No.

☐ Yes.

Explain here: \_\_\_\_\_

**Fill in this information to identify your case:**

Debtor 1 **Larry Williams**  
First Name Middle Name Last Name

Debtor 2 **Marilyn Y Williams**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number **17-36758**  
(if known)

☐ Check if this is an amended filing

## Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Have Secured Claims**

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>Ford Motor Credit</b>	<input checked="" type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <b>2015 Ford Explorer 78000 miles - (Vehicle surrendered)</b>	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name: <b>Key Bank, N.A.</b>	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <b>2017 Chevrolet Trax 3500 miles Kelley Blue Book, private party (replacement value)</b>	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name: <b>US Bank N.A.</b>	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <b>49 Ramblewood Drive Newburgh, NY 12550 Orange</b>	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

property **County**  
securing debt: **Property is being rebuilt**

☐ Retain the property and [explain]:

Creditor's **Volkswagen Credit, Inc**  
name:

☐ Surrender the property.  
☐ Retain the property and redeem it.  
☐ Retain the property and enter into a  
*Reaffirmation Agreement.*

☐ No  
☒ Yes

Description of **2017 VW Tiguan**  
property **(Lease)**  
securing debt:

☒ Retain the property and [explain]:  
**Retain & pay**

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases**

**Will the lease be assumed?**

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Larry Williams  
**Larry Williams**  
Signature of Debtor 1

X /s/ Marilyn Y Williams  
**Marilyn Y Williams**  
Signature of Debtor 2

Date July 10, 2019

Date July 10, 2019



Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

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Case number *(if known)* **17-36758**

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Fill in this information to identify your case:

Debtor 1 Larry Williams  
Debtor 2 Marilyn Y Williams  
(Spouse, if filing)  
United States Bankruptcy Court for the: Southern District of New York  
Case number 17-36758  
(if known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☐ 1. There is no presumption of abuse
- ☒ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☒ Check if this is an amended filing

## Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

### Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☒ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

☐ Married and your spouse is NOT filing with you. You and your spouse are:

☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$ 6,168.72
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm		
	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	Copy here -> \$ 0.00
6. Net income from rental and other real property		
	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$ 0.00
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

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	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
<b>8. Unemployment compensation</b> Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you ..... \$ <b>0.00</b> For your spouse ..... \$ <b>0.00</b>	\$ <b>0.00</b>	\$ <b>0.00</b>
<b>9. Pension or retirement income.</b> Do not include any amount received that was a benefit under the Social Security Act.	\$ <b>2,659.18</b>	\$ <b>0.00</b>
<b>10. Income from all other sources not listed above.</b> Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. ..... \$ <b>0.00</b> ..... \$ <b>0.00</b> Total amounts from separate pages, if any. + \$ <b>0.00</b>	\$ <b>0.00</b> \$ <b>0.00</b> + \$ <b>0.00</b>	\$ <b>0.00</b> \$ <b>0.00</b> \$ <b>0.00</b>
<b>11. Calculate your total current monthly income.</b> Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ <b>2,659.18</b>	\$ <b>6,168.72</b>
	= \$ <b>8,827.90</b> Total current monthly income	

**Part 2: Determine Whether the Means Test Applies to You**

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11 ..... **Copy line 11 here=>** \$ **8,827.90**

Multiply by 12 (the number of months in a year) x 12

12b. The result is your annual income for this part of the form 12b. \$ **105,934.80**

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live. **NY**

Fill in the number of people in your household. **2**

Fill in the median family income for your state and size of household. 13. \$ **66,056.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.

14b. ☒ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

<b>X /s/ Larry Williams</b> <b>Larry Williams</b> Signature of Debtor 1	<b>X /s/ Marilyn Y Williams</b> <b>Marilyn Y Williams</b> Signature of Debtor 2
Date <b>July 10, 2019</b> MM / DD / YYYY	Date <b>July 10, 2019</b> MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1 Larry Williams

Debtor 2 Marilyn Y Williams  
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 17-36758  
(if known)

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

☒ 1. There is no presumption of abuse.

☐ 2. There is a presumption of abuse.

☒ Check if this is an amended filing

Official Form 122A - 2  
Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

**Part 1:** Determine Your Adjusted Income

1. Copy your total current monthly income. Copy line 11 from Official Form 122A-1 here=>..... \$ 8,827.90

2. Did you fill out Column B in Part 1 of Form 122A-1?

☐ No. Fill in \$0 for the total on line 3.

☒ Yes. Is your spouse Filing with you?

☐ No. Go to line 3.

☒ Yes. Fill in \$0 for the total on line 3.

3. Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents. Follow these steps:

On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents?

☒ No. Fill in 0 for the total on line 3.

☐ Yes. Fill in the information below:

**State each purpose for which the income was used**

For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.

**Fill in the amount you are subtracting from your spouse's income**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Total. \_\_\_\_\_

\$ 0.00

Copy total here=>... - \$ 0.00

4. Adjust your current monthly income. Subtract line 3 from line 1.

\$ 8,827.90

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

**Part 2: Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to *you*, it means both you and your spouse if Column B of Form 122A-1 is filled in.

**5. The number of people used in determining your deductions from income**

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

**2**

**National Standards**

You must use the IRS National Standards to answer the questions in lines 6-7.

**6. Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ **1,132.00**

**7. Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

**People who are under 65 years of age**

7a. Out-of-pocket health care allowance per person \$ **49.00**

7b. Number of people who are under 65 X **2**

7c. **Subtotal.** Multiply line 7a by line 7b. \$ **98.00** Copy here=> \$ **98.00**

**People who are 65 years of age or older**

7d. Out-of-pocket health care allowance per person \$ **117.00**

7e. Number of people who are 65 or older X **0**

7f. **Subtotal.** Multiply line 7d by line 7e. \$ **0.00** Copy here=> +\$ **0.00**

7g. **Total.** Add line 7c and line 7f \$ **98.00** Copy total here=> \$ **98.00**

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

**Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- ☒ **Housing and utilities - Insurance and operating expenses**
- ☒ **Housing and utilities - Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form.  
This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ **661.00**

9. **Housing and utilities - Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses..... \$ **1,854.00**

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
<b>US Bank N.A.</b>	\$ <b>2,968.12</b>

Total average monthly payment \$ **2,968.12** Copy here=> -\$ **2,968.12** Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (*mortgage or rent expense*). If this amount is less than \$0, enter \$0. \$ **0.00** Copy here=> \$ **0.00**

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** \$ **0.00**

Explain why:

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- ☐ 0. Go to line 14.
- ☐ 1. Go to line 12.
- ☒ 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ **598.00**

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

**Vehicle 1** Describe Vehicle 1: **2017 VW Tiguan (Lease)**

13a. Ownership or leasing costs using IRS Local Standard..... \$ **485.00**

13b. Average monthly payment for all debts secured by Vehicle 1.  
Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
<b>Volkswagen Credit, Inc</b>	\$ <b>274.34</b>

Total Average Monthly Payment

\$ **274.34**

Copy here => -\$ **274.34** Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense  
Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0.

\$ **210.66**

Copy net Vehicle 1 expense here => \$ **210.66**

**Vehicle 2** Describe Vehicle 2: **2017 Chevrolet Trax 3500 miles Kelley Blue Book, private party (replacement value)**

13d. Ownership or leasing costs using IRS Local Standard..... \$ **485.00**

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
<b>Key Bank, N.A.</b>	\$ <b>409.25</b>

Total Average Monthly Payment

\$ **409.25**

Copy here => -\$ **409.25** Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense  
Subtract line 13e from line 13d. if this amount is less than \$0, enter \$0. ....

\$ **75.75**

Copy net Vehicle 2 expense here => \$ **75.75**

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation. \$ **0.00**

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*. \$ **189.00**

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

**Other Necessary Expenses** In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  
Do not include real estate, sales, or use taxes. \$ **1,117.71**
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.  
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$ **31.39**
18. **Life Insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ **136.41**
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. \$ **0.00**
20. **Education:** The total monthly amount that you pay for education that is either required:  
☒ as a condition for your job, or  
☒ for your physically or mentally challenged dependent child if no public education is available for similar services. \$ **0.00**
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  
Do not include payments for any elementary or secondary school education. \$ **0.00**
22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  
Payments for health insurance or health savings accounts should be listed only in line 25. \$ **0.00**
23. **Optional telephone and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. +\$ **186.00**
24. **Add all of the expenses allowed under the IRS expense allowances.** \$ **4,435.92**  
Add lines 6 through 23.



Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

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**Additional Expense Deductions**

These are additional deductions allowed by the Means Test.

*Note:* Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance	\$	<u>0.00</u>
Disability insurance	\$	<u>0.00</u>
Health savings account	+ \$	<u>0.00</u>

Total

\$ 0.00

Copy total here=> \$ 0.00

Do you actually spend this total amount?

- ☐ No. How much do you actually spend?  
☒ Yes

\$ \_\_\_\_\_

26. **Continued contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).

\$ 0.00

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

By law, the court must keep the nature of these expenses confidential.

\$ 0.00

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

\$ 0.00

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$160.42\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

\$ 0.00

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

\$ 0.00

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

+\$ 150.00

32. **Add all of the additional expense deductions.**

Add lines 25 through 31.

\$ 150.00

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

### Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

#### Mortgages on your home:

33a. Copy line 9b here  $\Rightarrow$  **Average monthly payment**  
\$ **2,968.12**

#### Loans on your first two vehicles:

33b. Copy line 13b here  $\Rightarrow$  \$ **274.34**

33c. Copy line 13e here  $\Rightarrow$  \$ **409.25**

33d. List other secured debts:

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
<b>Ford Motor Credit</b>	<b>2015 Ford Explorer 78000 miles - (Vehicle surrendered)</b>	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	\$ <b>557.97</b>
		<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	\$
		<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	+\$

33e. Total average monthly payment. Add lines 33a through 33d  $\Rightarrow$  \$ **4,209.68** Copy total here  $\Rightarrow$  \$ **4,209.68**

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

☐ No. Go to line 35.

☒ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
<b>US Bank N.A.</b>	<b>49 Ramblewood Drive Newburgh, NY 12550 Orange County Property is being rebuilt</b>	\$ <b>4,778.18</b>	$\div 60 =$ \$ <b>79.64</b>
<b>Volkswagen Credit, Inc</b>	<b>2017 VW Tiguan (Lease)</b>	\$ <b>480.09</b>	$\div 60 =$ \$ <b>8.00</b>
		\$	$\div 60 =$ +\$
		Total \$ <b>87.64</b>	Copy total here $\Rightarrow$ \$ <b>87.64</b>

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

☐ No. Go to line 36.

☒ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims ..... \$ **13,152.67** ÷ 60 = \$ **219.21**

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

**36. Are you eligible to file a case under Chapter 13?** 11 U.S.C. § 109(e).

For more information, go online using the link for *Bankruptcy Basics* specified in the separate instructions for this form. *Bankruptcy Basics* may also be available at the bankruptcy clerk's office.

- ☐ No. Go to line 37.  
☒ Yes. Fill in the following information.

Projected monthly plan payment if you were filing under Chapter 13 \$ **500.00**

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

X **10.00**

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense if you were filing under Chapter 13

\$ **50.00**

Copy total here=> \$ **50.00**

**37. Add all of the deductions for debt payment.**

Add lines 33e through 36.

\$ **4,566.53**

**Total Deductions from Income**

**38. Add all of the allowed deductions.**

Copy line 24, *All of the expenses allowed under IRS expense allowances* \$ **4,435.92**

Copy line 32, *All of the additional expense deductions* \$ **150.00**

Copy line 37, *All of the deductions for debt payment* +\$ **4,566.53**

Total deductions

\$ **9,152.45**

Copy total here.....=> \$ **9,152.45**

**Part 3: Determine Whether There is a Presumption of Abuse**

**39. Calculate monthly disposable income for 60 months**

39a. Copy line 4, *adjusted current monthly income* \$ **8,827.90**

39b. Copy line 38, *Total deductions* - \$ **9,152.45**

39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).  
Subtract line 39b from line 39a

\$ **-324.55**

Copy here=> \$ **-324.55**

For the next 60 months (5 years) x 60

39d. Total. Multiply line 39c by 60

39d. \$ **-19,473.00**

Copy here=> \$ **-19,473.00**

**40. Find out whether there is a presumption of abuse.** Check the box that applies:

- ☒ **The line 39d is less than \$7,700\*.** On the top of page 1 of this form, check box 1, *There is no presumption of abuse.* Go to Part 5.
- ☐ **The line 39d is more than \$12,850\*.** On the top of page 1 of this form, check box 2, *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Go to Part 5.
- ☐ **The line 39d is at least \$7,700\*, but not more than \$12,850\*.** Go to line 41.

\*Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 **Larry Williams**  
Debtor 2 **Marilyn Y Williams**

Case number (if known) **17-36758**

41. 41a. **Fill in the amount of your total nonpriority unsecured debt.** If you filled out *A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules* (Official Form 106Sum), you may refer to line 3b on that form.

\$ \_\_\_\_\_  
x .25

- 41b. **25% of your total nonpriority unsecured debt.** 11 U.S.C. § 707(b)(2)(A)(i)(I)  
Multiply line 41a by 0.25.....

\$ \_\_\_\_\_

Copy  
here=>

\$ \_\_\_\_\_

42. **Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.**  
Check the box that applies:

- ☐ **Line 39d is less than line 41b.** On the top of page 1 of this form, check box 1, *There is no presumption of abuse.* Go to Part 5.
- ☐ **Line 39d is equal to or more than line 41b.** On the top of page 1 of this form, check box 2, *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

**Part 4: Give Details About Special Circumstances**

43. **Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative?** 11 U.S.C. § 707(b)(2)(B).

- ☒ No. Go to Part 5.
- ☐ Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.

Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Part 5: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X /s/ Larry Williams**

**Larry Williams**  
Signature of Debtor 1

Date **July 10, 2019**  
MM / DD / YYYY

**X /s/ Marilyn Y Williams**

**Marilyn Y Williams**  
Signature of Debtor 2

Date **July 10, 2019**  
MM / DD / YYYY